

The following new data fields have been added to the Patient Policy Information Screen.

Plan Information Section: Plan Filing Time Frame.

Utilization Review Info Section: Ambulatory Care Certification.

Subscriber Information Section: Primary Care Provider, Primary Provider Phone.

Subscriber's Employer Information: ESGHP (Employer Sponsored Group Health Plan), Employment Status, Retirement Date.

Plan Coverage Limitations Section: *Dental Coverage, Mental Health Coverage.*

Introduction

This option provides information needed to answer questions from insurance carriers regarding specific bills or episodes of care. This information is presented in List Manager Screens.

Because the same actions are available on most screens, and most screens can be accessed from any other screen; these "Common Actions" are listed first and are not repeated under each screen description. Only actions specific to a screen are included with that screen description.

Actions shown in italics access other screens.

Common Actions

BC Bill Charges - Accesses the Bill Charges screen.

DX Bill Diagnoses - Accesses the Bill Diagnoses screen.

PR Bill Procedures - Accesses the Bill Procedures screen.

Introduction, cont.

- CI Go to Claim Screen Returns you to the Claim Information screen. Available on all screens that may be opened from the Claim Information screen.
- AR Account Profile Accesses the AR Account Profile screen.
- CM Comment History Accesses the AR Comment History screen.
- IR Insurance Reviews Accesses the Insurance Reviews/ Contacts screen.
- HS Health Summary Displays a Health Summary report. The information displayed on the Health Summary is site specified through the MCCR Site Parameter Display/Edit option.
- AL Go to Active List Returns you to the Third Party Active Bills screen if that screen was accessed upon entering this option; otherwise, this action returns you to the menu.
- VI Insurance Company Accesses the Insurance Company screen.
- VP Policy Accesses the Patient Policy Information screen.
- AB Annual Benefits Accesses the Annual Benefits screen.
- EL Patient Eligibility Accesses the Patient Eligibility screen.
- EX Exit Action Exits the option.

Third Party Active Bills Screen

This is the first screen displayed if you enter a patient name at the first prompt of this option. It lists all active third party bills for the specified patient in order of date created. All bills created in the Integrated Billing Third Party Billing module can be found on this screen or the Inactive Bills screen.

Actions

- IL Inactive Bills Accesses the Inactive Bills screen.
- PI Patient Insurance Accesses the Patient Insurance screen.

Introduction, cont.

CP Change Patient - Allows you to choose another patient and re-displays the Third Party Active Bills screen for that patient.

Inactive Bills Screen

This screen lists inactive bills for a specified patient. All bills created in the Integrated Billing Third Party Billing module are found on this screen or the Third Party Active Bills screen. Bills are displayed beginning with most recent "statement from" date.

Actions

CD Change Dates - Allows you to change the bills listed by changing the most recent "statement from" date to be displayed.

Patient Insurance Screen

This screen displays the list of insurance policies for a patient. It is based on the Patient Insurance Management screen of the Patient Insurance Info View/Edit option. It is only available from the Third Party Active Bills screen.

Claim Information Screen

This screen contains bill data and status information to provide an overall status of the bill. This is the primary claim screen for the inquiry, and many actions are provided to expand on the details of the claim.

If a policy has been updated but the bill has not, those changes are not reflected on this screen. Updated or current insurance information may be viewed using the three insurance screens.

Actions

CB Change Bill - Allows you to change the bill being displayed. If you entered a patient name at the first prompt of this option, only bills for that patient may be selected. If you entered a bill number at the first prompt, any bill may be selected.

Introduction, cont.

Bill Charges Screen

This screen displays a bill's charge information as it would print on the bill. For UB-92 bills, this closely corresponds to Form Locators 42-49; therefore, any prosthetic items, Rx refills, or additional diagnoses and procedures are included. For HCFA 1500 bills, this closely corresponds to Block 24.

Bill Diagnosis Screen

This screen displays all diagnoses assigned to the bill, in the order they are printed on the bill.

Bill Procedures Screen

This screen lists all procedures assigned to a bill, in the order they are printed on the bill.

AR Account Profile Screen

This screen provides the financial history of a claim's account. This includes the current status of the bill in both IB and AR, as well as the payment or transaction history of the bill from Accounts Receivable. This screen is loosely based on the Profile of Accounts Receivable option.

Actions

VT Transaction Profile - Accesses the AR Transaction Profile screen for a selected transaction.

AR Transaction Profile Screen

This screen displays detailed account transaction information for individual claim transactions. It is is loosely based on the Accounts Receivable Transaction Profile option.

AR Comment History Screen

This screen displays AR comments for the claim's account.

Introduction, cont.

Actions

AD Add AR Comment - Allows you to add an AR Transaction Comment to the bill being displayed. Comment transactions may not be added to a bill that has not been authorized in IB.

Insurance Reviews/Contacts Screen

This screen displays all insurance reviews and contacts for the episodes of care on a bill. It is based on the Insurance Reviews/Contacts screen of the Claims Tracking Insurance Review Edit option. The primary difference between the two screens is that this screen consolidates all contacts for each episode being billed on a claim, while the Claims Tracking screen displays the contacts for a single episode of care.

Actions

VR Reviews/Appeals - Displays expanded information on a selected insurance contact. The screen accessed by this action will depend on the type of contact selected. If the contact is an appeal or denial, the Expanded Appeals/Denials screen is opened; otherwise, the Expanded Insurance Reviews screen is opened.

Expanded Appeals/Denials Screen

This screen displays expanded information on insurance appeals and denials listed on the Insurance Review/Contacts screen. This screen is based on the Expanded Appeals/Denials screen of the Claims Tracking Appeal/Denial Edit option.

Expanded Insurance Reviews Screen

This screen displays expanded information on insurance reviews listed on the Insurance Reviews/Contacts screen. This screen is based on the Expanded Insurance Reviews screen of the Claims Tracking Insurance Review Edit option.

Insurance Company Screen

This screen displays extended information on an Insurance Company. It is based on the Insurance Company Editor screen of the Insurance Company Entry/Edit option. This screen may be entered from the Patient Insurance screen or from any of the bill specific screens. Once a bill is selected, this screen displays only information related to the insurance carriers assigned to that bill.

Introduction, cont.

Patient Policy Information Screen

This screen displays extended information on insurance policies. It is based on the Patient Policy Information screen of the Patient Insurance Info View/Edit option. This screen may be entered from either the Patient Insurance screen or from any of the bill specific screens. Once a bill is selected, this screen will only display information related to the insurance policies assigned to the bill.

Annual Benefits Screen

This screen displays extended information on the annual benefits of insurance policies. It is based on the Annual Benefits Editor screen of the Patient Insurance Info View/Edit option. This screen may be entered from the Patient Insurance screen or from any of the bill specific screens. Once a bill has been chosen, this screen displays information related to the insurance policies assigned to that bill.

Patient Eligibility Screen

This screen displays the current information on the patient's eligibility for care and service connection status. It is loosely based on the Eligibility Inquiry for Patient Billing option. This screen is available from the Third Party Active Bills screen and the bill specific screens.

If this screen is accessed from one of the bill specific screens, such as the Claim Information screen, the standard list of bill screen actions will be available from this screen.

If this screen is accessed from the Patient Insurance screen, no other screens are available as actions from this screen; and you must return to a previous screen to access other screens.

Example

The following examples show the various screens available through this option.

Third Party Active Bills					31, 199	5 @10:07	:11			Pag	ge 1 of 1
JC	NES, ANDRE	W A9	281								NSC
Bi	.11 #	From	To	Ty	pe St	at Rate		Ins	urer	Orig Amt	Curr Amt
1	L10263	04/20)/92 04/	'20/92 OP	BI	REIM	INS	Н	IEALTH	0.00	0.00
2	L10270	04/20)/92 04/	'24/92 OP	PC	REIM	INS	H	IEALTH	698.30	698.30
3	N10072 *	11/16	5/93 11/	17/93 OP	N	REIM	INS	+ H	EALTH	199.00	199.00
4	N10094	02/16	5/94 02/	'16/94 OP	PC	REIM	INS	+ H	EALTH	196.00	196.00
5	N10123 *	03/01	L/94 03/	15/94 OP	BI	REIM	INS	+ H	EALTH	0.00	0.00
6	N10150 *	03/14	1/94 03/	'15/94 OP	BI	REIM	INS	+ A	ETNA	0.00	0.00
7	N10173 *	03/02	2/94 03/	'03/94 OP	BI	REIM	INS	A	ETNA	0.00	0.00
8	N10174	03/06	5/94 03/	'07/94 OP	N	REIM	INS	A	ETNA	356.00	356.00
9	N10222	05/01	L/94 05/	'31/94 IP-	-F BI	REIM	INS	Н	IEALTH	0.00	0.00
10	N10236	06/01	L/94 06/	'05/94 IP-	-L BI	REIM	INS	Н	EALTH	0.00	0.00
11	N10273 *	03/03	3/94 03/	'31/94 IP-	-F A	REIM	INS	+ H	EALTH	11221.00	856.45
12	N10275	08/30	0/94 09/	'30/94 IP	BI	REIM	INS	A	ETNA	0.00	0.00
+		* Cat C	Charges o	n Hold + 2	2nd/3rd	Carrier					

CI Claim Information IL Inactive Bills PI Patient Insurance
CP Change Patient HS Health Summary EL Patient Eligibility

Select Action: Next Screen//

Ir	active B	ills	May 1	7, 1996	13:30	:26		Page:	1 of 2
JC	NES, ANDRE	W A9281					** All Ina	active Bill	Ls ** (9)
Bi	.11 #	From	To	Type	Stat	Rate	Insurer	Orig Amt	Curr Amt
1	N10397	06/01/94	06/05/94	$_{ m IL-L}$	CC	REIM INS	+ AETNA	935.00	0.00
2	N10198	06/01/94	06/05/94	IP-L	CB	REIM INS	+ HEALTH	0.00	0.00
3	N10212	05/07/94	05/12/94	IP-C	CB	REIM INS	HEALTH	0.00	0.00
4	N10148 *	03/02/94	03/03/94	OP	CB	REIM INS		0.00	0.00
5	N10162 *	03/02/94	03/03/94	OP	CB	REIM INS		0.00	0.00
6	N10095	02/16/94	02/16/94	OP	CB	REIM INS		0.00	0.00
7	L10260	04/14/92	04/20/92	OP-F	CB	REIM INS	AETNA	1026.02	1026.02
8	L00389	02/08/90	02/08/90	OP	CC	REIM INS	BC/BS	26.00	0.00
9	00036A	02/07/90	02/07/90	OP	CC	REIM INS	BC/BS	26.00	0.00
+		* Cat C Charg	es on Hold	+ 2nd/31	rd Carr	rier	•		

CI Claim Information AL Go to Active List CD Change Dates
EX Exit Action

Select Action: Next Screen//

Example, cont.

Patient Policy Information May 31, 1995 @10:07:11 Page: 1 of 3 Extended Policy Information for: JONES, ANDREW 000-000-9281 Primary ** Plan Currently Active ** HEALTH INS LIMITED Insurance Company

Plan Information Insurance Company

Is Group Plan: YES Company: HEALTH INS LIMITED Group Name: Street: 2345 CENTRAL AVE Group Number: GN 48923222 City/State: ALBANY, NY 12180

Type of Plan: DUAL COVERAGE Billing Ph:

Plan Filing TF: Precert Ph:

Utilization Review Info Effective Dates & Source

Require UR: YES Effective Date: 01/01/94

Require Amb Cert: Expiration Date:

Require Pre-Cert: YES Source of Info: INTERVIEW

Exclude Pre-Cond: NO Policy Not Billable: NO

Subscriber Information Subscriber's Employer Information

Whose Insurance: VETERAN Emp Sponsored Plan: No

+	Enter ?? for more actions							
BC	Bill Charges	AR	Account Profile	VI	Insurance Company			
DX	Bill Diagnosis	CM	Comment History	VP	Policy			
PR	Bill Procedures	IR	Insurance Reviews	AB	Annual Benefits			
CI	Go to Claim Screen	HS	Health Summary	\mathtt{EL}	Patient Eligibility			
		AL	Go to Active List	EX	Exit Action			

Select Action: Quit//

EXAMPLE, cont.

```
May 17, 1996 15:39:23
                                                               Page:
Annual Benefits
                                                                         1 of
Annual Benefits for: GHI Ins. Co
                                                 Ben Yr: MAR 01, 1993
          Policy: GN 48923222
                            Policy Information
                   Max. Out of Pocket: $ 500
              Ambulance Coverage (%):
                                 Inpatient
                                $ 500 Drug/Alcohol Lifet. Max:

$ 100 Drug/Alcohol Annual Max:

$ Nursing Home (%):

$ Other Inpt. Charges (%):
                                                Drug/Alcohol Lifet. Max:
         Annual De ductible: $500
     Per Admis. Deductible: $ 100
Inpt. Lifetime Max: $
                                               Drug/Alcohol Annual Max:
                                               Nursing Home (%):
           Inpt. Annual Max:
           Room & Board (%):
                               Outpatient
         Annual Deductible: $50
                                                             Surgery (%):
      Per Visit Deductible: $50
                                                           Emergency (%):
               Lifetime Max: $
                                                       Prescription (%):
                                               Adult Day Health Care?: UNK
                  Annual Max: $
                                                       Dental Cov. Type: PERCENTAGE AMOU
                   Visit (%):
       Max Visits Per Year:
                                                         Dental Cov. (%): 48%
         Mental Health Inpatient
                                                       Mental Health Outpatient
                                                MH Opt. Max Days/Year:
    MH Inpt. Max Days/Year:
                                                 MH Lifetime Opt. Max:
     MH Lifetime Inpt. Max:
       MH Annual Inpt. Max:
                                                   MH Annual Opt. Max: $
   Mental Health Inpt. (%):
                                               Mental Health Opt. (%):
          Home Health Care
                                                           Hospice
                Care Level:
                                                     Annual Deductible: $
            Visits Per Year:
                                                 Inpatient Annual Max.: $
        Max. Days Per Year:
                                                          Lifetime Max.: $
                                                     Room and Board (%):
        Med. Equipment (%):
           Visit Definition:
                                              Other Inpt. Charges (%):
             Rehabilitation
                                                        IV Management
                                        IV Infusion Opt?:

IV Infusion Inpt?:
            OT Visits/Yr:
                                              IV Infusion Opt?: UNK
            PT Visits/Yr:
                                                                   UNK
   ST Visits/Yr:
Med Cnslg. Visits/Yr:
                                           IV Antibiotics Opt?:
                                                                   UNK
                                           IV Antibiotics Inpt?:
             User Information
               Entered By: BROWN, NANCY
               Entered On: 02/02/94
         Last Updated By: BROWN, NANCY
         Last Updated On: 02/18/94
          Enter ?? for more actions
BC Bill Charges AR Account Profile VI Insurance Company
DX Bill Diagnosis CM Comment History VP Policy
PR Bill Procedures IR Insurance Reviews AB Annual Benefits
CF to Claim Square US Health Comment.
                                                     EL Patient Eligibility
CI Go to Claim Screen HS Health Summary
                          AL Go to Active List EX Exit Action
Select Action: Quit//
```

Option Overview

PATIENT INSURANCE INFO VIEW/EDIT - Used to look at a patient's insurance information and edit that data, if necessary.

VIEW PATIENT INSURANCE - Used to look at a patient's insurance information.

INSURANCE COMPANY ENTRY/EDIT - Used to enter new insurance companies into the INSURANCE COMPANY file and edit data on existing companies.

VIEW INSURANCE COMPANY - Used to look at data related to a selected insurance company.

LIST INACTIVE INS. CO. COVERING PATIENTS - Provides a listing of inactive insurance companies that are listed in the system as providing coverage.

LIST PLANS BY INSURANCE COMPANY - Produces a list of insurance plans offered by one or more insurance companies. May also be used to provide a list of subscribers for one or more insurance plans at one or more insurance companies.

LIST NEW NOT VERIFIED POLICIES - Produces a list, by patient, of new insurance entries that have not been verified.



The following new data fields have been added to the Patient Policy Information Screen.

Plan Information Section: Plan Filing Time Frame.

Utilization Review Info Section: Ambulatory Care Certification.

Subscriber Information Section: Primary Care Provider, Primary Provider Phone.

Subscriber's Employer Information: ESGHP (Employer Sponsored Group Health Plan), Employment Status, Retirement Date.

Plan Coverage Limitations Section: *Dental Coverage, Mental Health Coverage.*

Introduction

The Patient Insurance Info View/Edit option is used to look ata patient's insurance information and edit that data, if necessary. The system groups information that is specific to the insurance company, specific to the patient, specific to the group plan, specific to the annual benefits available, and the annual benefits already used. Inactive policies will be listed as long as the patient has not been repointed from that inactive policy to an active policy.

About the Screens...

In the top left corner of each screen is the screen title. On some screens, the following line is a description of the information displayed. A plus sign (+) at the bottom of the screen indicates there are additional screens. Left or right arrows (<<< >>>) may be displayed to indicate there is additional information to the left or right of the screen. Available actions are displayed below the screen. <??> entered at any "Select Action" prompt displays all available actions for that screen.

You may QUIT from any screen which will bring you back one level or screen. EXIT is also available on most screens. When EXIT is entered, you are asked if you wish to "Exit option entirely?". A YES response returns you to the menu. A NO response has the same result as the QUIT action. For more information on the use of the List Manager utility, please refer to the appendix at the end of this manual.

Introduction, cont.

Following is a listing of the screens found in this option and a brief description of the actions they allow. Actions shown in *italics* access other screens. Once an action has been selected, <??> may be entered at most of the prompts that appear for lists of acceptable responses or instruction on how to respond.

Patient Insurance Management Screen

Once a patient is selected, this screen is displayed listing all the patient's insurance policies. Information provided for each policy may include type of policy, group name, holder, effective date, and expiration date.

Actions

AP Add Policy - Allows you to add an insurance policy for the selected patient.

VP Policy Edit/View (accesses Patient Policy Information screen) - Allows you to view and edit extensive insurance policy data.

DP Delete Policy - Allows you to delete an insurance policy for the selected patient. IB INSURANCE SUPERVISOR security key is required.

AB Annual Benefits - (accesses Annual Benefits Editor screen) - Used to enter annual benefits data for the selected policy.

EA Fast Edit All - A quick way to enter portions of the patient insurance information.

BU Benefits Used (accesses the Benefits Used By Date Editor screen) - Used to enter policy benefits already used.

VC Verify Coverage - Allows the user to enter into the system verification that the insurance coverage exists and the information is correct.

RI Personal Riders - Displays current riders and allows addition of new riders.

CP Change Patient - Allows you to change to another patient without returning to the beginning of the option.

WP Worksheet Print - Used to print the standard worksheet showing the data for the benefit year within the past 12 months. If no benefit year on file, will print the standard form without the data. Must be printed at 132 column margin width.

Introduction, cont.

PC Print Insurance Cov. - Similar to worksheet. Used when bulk of information is already in the computer. Will show two most recent benefit years. If no benefit years on file, will offer WP action (see above).

Patient Policy Information Screen

This screen is displayed listing expanded policy information for the selected company. Categories include utilization review data, subscriber data, subscriber's employer information, effective dates, plan coverage limitations, last contact, and comments on the patient policy or insurance group plan. The sections on user information and insurance company information are not editable.

Actions

PI Change Plan Info - Allows entry/edit of group plan information.

UI UR Info - Allows entry/edit of utilization review information.

ED Effective Dates - Allows you to edit the effective date and expiration date of the insurance policy.

SU Subscriber Update - Allows you to edit the subscriber (person who holds the insurance coverage) information.

IP Inactive Plan - Allows you to inactivate an insurance plan, or move subscribers from multiple insurance plans into one master plan.

IC Insur. Contact Inf. - Allows you to add/edit the last insurance contact.

EM Employer Info - Allows you to edit the subscriber's employer information.

AC Add Comment - Allows the user to add a comment regarding the patient's policy or the insurance group plan.

EA Fast Edit All - A quick way to enter portions of the patient insurance information.

CP Change Policy Plan - Allows you to change the plan to which a veteran is subscribing.

Introduction, cont.

VC Verify Coverage - Allows the user to enter into the system verification that the insurance coverage exists and the information is correct.

AB Annual Benefits (accesses Annual Benefits Editor screen) - Used to enter annual benefits data for the selected policy.

CV Add/Edit Coverage - Allows you to add or edit coverage limitations for a specific plan.

BU Benefits Used - (accesses the Benefits Used By Date Editor screen) - Used to enter policy benefits already used.

Annual Benefits Editor Screen

Once the benefit year is selected, this screen is displayed listing all the benefits for the selected insurance policy and benefit year. Benefit categories may include inpatient benefits, outpatient benefits, mental health, home health care, hospice, rehabilitation, and IV management.

Actions

PI Policy Information - Allows entry/edit of maximum out of pocket and ambulance coverage.

IP Inpatient - Allows entry/edit of inpatient benefits data.

OP Outpatient - Allows entry/edit of outpatient benefits data.

MH Mental Health - Allows entry/edit of mental health inpatient and outpatient benefits data.

HH Home Health - Allows entry/edit of home health care benefits data.

HS Hospice - Allows entry/edit of hospice benefits data.

RH Rehab - Allows entry/edit of rehabilitation benefits data.

IV IV Mgmt. - Allows entry/edit of intravenous management benefits data.

Introduction, cont.

EA Edit All - Lists editable fields line by line for quick data entry.

CY Change Year - Allows you to change to another benefit year.

Benefits Used By Date Editor Screen

Once the benefit year is selected, this screen is displayed listing all the benefits used for the selected insurance policy and benefit year. Benefit categories may include inpatient and outpatient deductibles.

PI Policy Info - Allows entry/edit of policy information such as deductible met and pre-existing conditions.

OD Opt Deduct - Allows entry/edit of the outpatient deductible insurance information.

ID Inpt Deduct - Allows entry/edit of the inpatient deductible insurance information.

AC Add Comment - Allows the user to add a comment regarding claims filed.

EA Edit All - A quick way to enter portions of the patient insurance information.

CY Change Year - Allows you to change to another benefit year.

Example

**

Select PATIENT NAME: **DUMONT, ROLAND** 11-28-31 020248845 YES

SC VETERAN ..

Patient Insurance Management Nov 22, 1993 13:51:09 Page: 1 of 1

Insurance Management for Patient: DUMONT, ROLAND D8845

	Insurance Co.	Type of 1	Policy	Group	Holde:	r Effect.	Expires
1	RIGHA			1546	UNKN	OWN	
2	PRUDENTIAL	SURGICAL	EXPENS	123	SELF	04/01/93	
	Enter ?? f	or more a	ctions				
>>>							
ΑP	Add Policy	EA	Fast Ed	it All	CP	Change Patie	nt
VP	Policy Edit/View	g BU	Benefit	s Used	WP	Worksheet Pr	int
DP	Delete Policy	VC	Verify	Coverage	PC	Print Insura	nce Cov.
AB	Annual Benefits	RI	Persona	l Riders	EX	Exit	
Sel	ect Item(s): Quit	// VP=2	Polic	y Edit/View			

```
Patient PolicyInformationNov 22, 1993 13:51:39Page: 1 of 3Expanded PolicyInformation for: DUMONT, ROLAND013-92-8845PRUDENTIAL Insurance Company** Plan Currently Active
```

Plan Information Insurance Company

Is Group Plan: YES Company: PRUDENTIAL
Group Name: PACKERS Street: 123 MAIN STREET
Group Number: 123 City/State: YORKVILLE, NY 33343

Type of Plan: SURGICAL EXPENSE INSURANCE

Plan Filing TF: 1 year

Utilization Review Info Effective Dates & Source Require UR: YES Effective Date: 04/01/93

Require Amb Cert: YES Expiration Date: Require Pre-Cert: YES Source of Info: Exclude Pre-Cond: NO Policy Not Billable:

```
Enter ?? for more actions
```

ΡI	Change Plan Info	IC	Insur. Contact Inf.	CP	Change Policy Plan
UI	UR Info	EM	Employer Info	VC	Verify Coverage
ED	Effective Dates	CV	Add/Edit Coverage	AB	Annual Benefits
SU	Subscriber Update	AC	Add Comment	BU	Benefits Used
ΙP	Inactivate Plan	EΑ	Fast Edit All	EX	Exit

Select Item(s): Quit// AB=2 Annual Benefits

Example, cont.

```
Current benefit years on file:
   1. 12/01/93
BENEFIT YEAR BEGINNING ON: 12/01/93// <RET> DEC 1, 1993 .........
Annual Benefits Editor Nov 22, 1993 14:17:36 Page: 1 of 4
Annual Benefits for: PRUDENTIAL Ins. Co
           Policy: 123
                                               Ben Yr: DEC 1, 1992
                       Policy Information
                    Max. Out of Pocket: $ 300
                Ambulance Coverage (%):
                               Drug/Alcohol Lifet. Max: $ 8888
Drug/Alcohol Annual Max: $ 888
                                Inpatient
     Annual Deductible: $ 200
 Per Admis. Deductible: $ 40
    Inpt. Lifetime Max: $ 9999
                                          Nursing Home (%):
                                                              80%
      Inpt. Annual Max: $ 999 Other Inpt. Charges (%):
                                                              80%
      Room & Board (%):
                         80%
        Enter ?? for more actions
>>>
                                             EA Edit All
PI Policy Info
                     HH Home Health
                      HS Hospice
IP Inpatient
                                              CY Change Year
                       RH Rehab
                                              EX Exit
OP Outpatient
MH Mental Health
                       IV IV Mgmt.
Select Action: Next Screen// OP Outpatient
ANNUAL DEDUCTIBLE (OPT): 200//
PER VISIT DEDUCTIBLE: 25// <RET>
OUTPATIENT LIFETIME MAXIMUM: 9999//
OUTPATIENT ANNUAL MAXIMUM: 666// <RET>
OUTPATIENT VISIT (%): 80// <RET>
OUTPATIENT VISITS PER YEAR: 32// <RET>
OUTPATIENT SURGERY (%): 80// <RET>
EMERGENCY OUTPATIENT (%): 80//
PRESCRIPTION (%): 40// <RET>
```

ADULT DAY HEALTH CARE: 0 NO

DENTAL COVERAGE TYPE: PER VISIT AMOUNT//

DENTAL COVERAGE \$ OR %: 80// <RET>....

View Patient Insurance

INTRODUCTION

Actions

cont.

AB Annual Benefits - (accesses Annual Benefits Editor screen) - Used to view annual benefits data for the selected policy.

BU Benefits Used - (accesses Benefits Used By Date Editor screen) - Used to view policy benefits already used.

CP Change Patient - Allows you to change to another patient without returning to the beginning of the option.

Patient Policy Information Screen

This screen is displayed listing expanded policy information for the selected company. Categories include utilization review data, subscriber data, subscriber's employer information, policy information, effective dates, plan coverage limitations, last contact, comments on the patient policy or insurance group plan, and personal riders. The only action allowed from this screen is EXIT.

Annual Benefits Editor Screen

Once the benefit year is selected, this screen is displayed listing all the benefits for the selected insurance policy and benefit year. Benefit categories may include inpatient benefits, outpatient benefits, mental health, home health care, hospice, rehabilitation, and IV management. The only actions allowed from this screen are CY to change the benefit year and EXIT.

Benefits Used By Date Editor Screen

Once the benefit year is selected, this screen is displayed listing all the benefits used for the selected insurance policy and benefit year. Benefit categories may include inpatient and outpatient deductibles. The only actions allowed from this screen are CY to change the benefit year and EXIT.

Due to the nature of this option, a process chart has not been provided.

View Patient Insurance

EXAMPLE

The following example shows what might appear on your screen while using this option. User responses appear in boldface type.

Select PATIENT NAME: **DUMONT, ROLAND** 11-28-31 020248845 YES

SC VETERAN ..

Patient Insurance Management Nov 22, 1993 13:51:09 Page: 1 of 1

Insurance Management for Patient: DUMONT, ROLAND D8845

	Insurance Co.	Type of Policy	Group	Holder	Effect.	Expires
1	RIGHA		1546	UNKNOWN		
2	PRUDENTIAL	MAJOR MEDICAL	123 SELF		04/01/93	
	>>>					

VP Policy Edit/View BU Benefits Used EX Exit
AB Annual Benefits CP Change Patient

AB Annual Benefits CP Change Patient
Select Item(s): Quit// VP=2 View Policy Info

Patient Policy Information Nov 22, 1993 13:51:39 Page: 1 of 3

Expanded Policy Information for: DUMONT, ROLAND 013-92-8845

PRUDENTIAL Insurance Company **Plan Currently Active**

Plan Information Insurance Company
Is Group Plan: YES Company: PRUDENTIAL

Group Name: GE LIGHT PRUD Street: 123MAIN ST

Group Number: PRUD GRP # GE L City/State: ALBANY, NY 39239

Type of Plan: MEDICAL EXPENSE (OPT/PR Billing Ph: Plan Filing TF: 1 year Precert Ph:

Utilization Review Info Effective Dates & Source Require UR: YES Effective Date: 01/01/97

Require Amb Cert: YES Expiration Date:

Require Pre-Cert: YES Source of Info: INTERVIEW

Exclude Pre-Cond: NO Policy Not Billable: NO

Benefits Assignable: YES

+ Enter ?? for more actions

EX Exit

Select Item(s): Next Screen// <RET>

View Patient Insurance

Example, cont.

Patient Policy Information Nov 22, 1993 15:27:55 Page: 2 of 3

Expanded Policy Information for: DUMONT, ROLAND

PRUDENTIAL Insurance Company

+

Subscriber Information Subscriber's Employer Information

Whose Insurance: VETERAN Emp Sponsored Plan: Yes

Subscriber Name: DUMONT, ROLAND Employer: GE LIGHT Relationship: PATIENT Employment Status: RETIRED Insurance Number: 5948333 Retirement Date: 01/01/96

Coord. Benefits: PRIMARY Claims to Employer: Yes, Send to Employer

Primary Provider: Street: 1865 CANAL ST

Prim Prov Phone: City/State: SCHENECTADY, NY 29292

Phone: 371-5233

Insured Person's Information (use Subscriber Update action)

Insured's DOB: Str 1:

Enter ?? for more actions

EX Exit

Select Action:Next Screen// <RET>

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Expanded Policy Information for: DUMONT, ROLAND

PRUDENTIAL Insurance Company

Insured's Branch: Str 2:
Insured's Rank: City:
Insured's SSN: St/Zip:

Phone:

Plan Coverage Limitations

Coverage Effective Date Covered? Limit Comments _____ _____ _____ ______ INPATIENT 10/01/91 NO OUTPATIENT 10/01/91 CONDITIONAL Cond cov comment opt 2nd opt cond cov comm PHARMACY 10/01/91 YES DENTAL 10/01/91 NO MENTAL HEALTH 10/01/91 NO

Enter ?? for more actions

EX Exit

Select Action:Quit//

Insurance Company Entry/Edit



The following new data fields have been added to the View/Edit Plan Screen.

Plan Information Section: Plan Filing Time Frame.

Utilization Review Info Section: Ambulatory Care Certification.

Plan Coverage Limitations Section: *Dental Coverage, Mental Health Coverage.*

Introduction

The Insurance Company Entry/Edit option is used to enter new insurance companies into the INSURANCE COMPANY file and edit data on existing companies. An insurance company must be in the INSURANCE COMPANY file before it can be entered into a patient's record.

When entering new insurance companies, you will be prompted for the company street address, city, and whether or not the company will reimburse for treatment.

Following is a listing of the actions found on the screen in this option and a brief description of each. Once an action has been selected, <??> may be entered at most of the prompts that appear for lists of acceptable responses or instruction on how to respond.

Insurance Company Editor Screen

Once the insurance company is selected, this screen is displayed listing the following groups of information for that company: billing parameters, main mailing address, inpatient claims office data, outpatient claims office data, prescription claims office data, appeals office data, inquiry office data, remarks, and synonyms.